

Appendix VI. Sample Benefit History Report for O/As

BENEFIT HISTORY REPORT FOR (RE)CERTIFICATIONS DURING THE MONTH OF [2005/03]				
FOR OFFICIAL USE ONLY				
TRACS ID:	TRACM22802TRACM10461	Contract Number:	WA160018001	
Project Name:	BRANDT NORWEST	Project Number:		
REG/FO Code:	10/01	Subsidy Type:	H1	
Owner/Agent:	BREMERTON HOUSI	Unit#:	00 1516D	
Head of Household:	H**** ELR*****	Address:	00 1516D	
SSN:	000-19-6172	[For Reference Only]		
[Information below applies to this family member]				
Head of Household: 000-19-6172				
Family Member:	H**** ELR*****			
SSN:	000-19-6172	Date of Birth:	07/11/1929	
Social Security Income Benefits				
Payment Status Code:	C - Current Payment Status	Benefit History		
Date of Current Entitlement:	07/1994	Date	Gross Benefit	
Net Monthly Benefit if Payable:	\$470.00	12/2004	\$470.00	Credited
		12/2003	\$458.00	Credited
		12/2002	\$448.00	Credited
		12/2001	\$442.00	Credited
		07/2001	\$431.00	Credited
		12/2000	\$431.00	Credited
		12/1999	\$416.00	Credited
		12/1998	\$406.00	Credited
Supplemental Security Income Benefits				
Payment Status Code:	C01 - Eligible for Payments	Benefit History		
Alien Indicator:		Date	Federal Amount	State Amount
SSI Monthly Assistance Amount (Current):	\$126.00	01/01/2005	\$129.00	\$0.00
State Supplement Amount (Current):	\$0.00	01/01/2004	\$126.00	\$0.00
Payee Name and Address:		01/01/2003	\$124.00	\$0.00
HEL*****		07/01/2002	\$123.00	\$0.00
APT*****		01/01/2002	\$123.00	\$5.45
1516 DATE ST		12/01/2001	\$120.00	\$14.95
VANCOUVER WA		08/01/2001	\$120.00	\$5.45
		07/02/2001	\$19.00	\$0.00
				Underpayment
Medicare Data				
Payee Name and Address:		Premium	Indicator	Code
HEL*****				Start
APT*****				Stop
1516 DATE STREET	Hospital Insurance:	\$0.00	N	
VANCOUVER WA	Supp. Med. Insurance:	\$66.60	Y	500 07/1994
Dual Entitlement Data				
DE data not applicable				
Black Lung Entitlement:	\$0.00 - Not Applicable			
Disability:	Yes			